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Bib Data Sheet

CONFIRMATION NO. 6039

<b>SERIAL NUMBER</b> 09/788,671	<b>FILING DATE</b> 02/20/2001 <b>RULE</b>	<b>CLASS</b> 264	<b>GROUP ART UNIT</b> 1732	<b>ATTORNEY DOCKET NO.</b> 5040-06324
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## APPLICANTS

John T. Foreman, Louisville, KY;  
Galen R. Powers, Louisville, KY;  
Matthew C. Lattis, Louisville, KY;

\*\* CONTINUING DATA \*\*\*\*\* NONE  
RB

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE  
RB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 03/19/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWING</b> 47	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> RB initials				

## ADDRESS

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## TITLE

Graphical interface for receiving eyeglass prescription information

<b>FILING FEE RECEIVED</b> 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit